UNITED STATES

SECURITIES AND EXCHANGE COMMISSION

Washington, D.C. 20549

FORM D

NOTICE OF SALE OF SECURITIES PURSUANT TO REGULATION D, SECTION 4(6), AND/OR JUNIFORM LIMITED OFFERING EXEMPTION OMB APPROVAL

OMB Number:

3235-0076

Expires:

April 30, 2008

Estimated average burden

SEC USE ONLY

hours per response......16.00

Prefix

Serial

DATE RECEIVED

<u> </u>	
Name of Offering (check if this is an amendment and name has changed, and indicate change.) Perfect Search Corporation Common Stock Financing	
Filing Under (Check box(es) that apply): Rule 504 Rule 505 Rule 506 Type of Filing: New Filing Amendment	Section 4(6) DEDEFIVED
A. BASIC IDENTIFICATION DATA	(APR 0 3-2007 >)
Enter the information requested about the issuer Name of Issuer (check if this is an amendment and name has changed, and indicate change.) Perfect Search Corporation	185 45
Address of Executive Offices (Number and Street, City, State, Zip Code) 615 East 3650 North, Provo, Utah 84604	Telephone Number (Including Area Code) (801) 592-0040
Address of Principal Business Operations (Number and Street, City, State, Zip Code) (if different from Executive Offices)	Telephone Number (Including Area Code)
Brief Description of Business The company develops and sells its intellectual properties, products, and industry and also to commercial, educational, religious, community and government users.	PROCESSED
Type of Business Organization Corporation	(please specify): THOMSON
Actual or Estimated Date of Incorporation or Organization: Month Year 0 1 0 7 Jurisdiction of Incorporation or Organization: (Enter two-letter U.S. Postal Service Abbreviation for St CN for Canada; FN for other foreign jurisdiction)	FINANCIAL Actual Estimated
GENERAL INSTRUCTIONS Federal: White Mont Files. All issues making an offering of acquirities in reliance on an examption under Regulation D or	

77d(6).

When To File: A notice must be filed no later than 15 days after the first sale of securities in the offering. A notice is deemed filed with the U.S. Securities and Exchange Commission (SEC) on the earlier of the date it is received by the SEC at the address given below or, if received at that address after the date on which it is due, on the date it was mailed by United States registered or certified mail to that address.

Where To File: U.S. Securities and Exchange Commission, 450 Fifth Street, N.W., Washington, D.C. 20549.

Copies Required: Five (5) copies of this notice must be filed with the SEC, one of which must be manually signed. Any copies not manually signed must be photocopies of the manually signed copy or bear typed or printed signatures.

Information Required: A new filing must contain all information requested. Amendments need only report the name of the issuer and offering, any changes thereto, the information requested in Part C, and any material changes from the information previously supplied in Parts A and B. Part E and the Appendix need not be filed with the SEC.

Filing Fee: There is no federal filing fee.

State:

This notice shall be used to indicate reliance on the Uniform Limited Offering Exemption (ULOE) for sales of securities in those states that have adopted ULOE and that have adopted this form. Issuers relying on ULOE must file a separate notice with the Securities Administrator in each state where sales are to be, or have been made. If a state requires the payment of a fee as a precondition to the claim for the exemption, a fee in the proper amount shall accompany this form. This notice shall be filed in the appropriate states in accordance with state law. The Appendix to the notice constitutes a part of this notice and must be completed.

ATTENTION

Failure to file notice in the appropriate states will not result in a loss of the federal exemption. Conversely, failure to file the appropriate federal notice will not result in a loss of an available state exemption unless such exemption is predicated on the filing of a federal notice.

> Potential persons who are to respond to the collection of information contained in this form are not required to respond unless the form displays a currently valid OMB control number.

	·	A	. B.	ASIC IDI	ENTII	FICATION DATA				
Each beneficial ownEach executive office	e issuer, if the issuer h	as been vote coorate i	r dispose, c ssuers and c	r direct the	vote	or disposition of, 10%	or mo	ore of a class of partnership	of equity issuers; a	securities of the issuer; nd
Check Box(es) that Apply:	Promoter	\boxtimes	Beneficia	l Owner	\boxtimes	Executive Officer	\boxtimes	Director		General and/or Managing Partner
Full Name (Last name first, if	individual)			i E				_ .		
Inouye, Dillon				i						
Business or Residence Address	ss (Number and Stree	t, City	, State, Zip	Code)				•		
615 East 3650 North, Provo	, Utah 84604			<u> </u>						
Check Box(es) that Apply:	Promoter		Beneficia	l Owner	<u> </u>	Executive Officer		Director		General and/or Managing Partner
Full Name (Last name first, if	individual)									
Stay, Timothy										
Business or Residence Addre		et, City	, State, Zip	Code)						
615 East 3650 North, Provo	, Utah 84604 —		<u> </u>							
Check Box(es) that Apply:	Promoter	_ ——	Beneficia	l Owner	⊠	Executive Officer	_ 	Director	U	General and/or Managing Partner
Full Name (Last name first, if	individual)		i							
Millet, Ronald										
Business or Residence Addre		et, City	, State, Zip	Code)						
81 West 220 South, Orem, U			<u>i</u>							, <u>, , , , , , , , , , , , , , , , , , </u>
Check Box(es) that Apply:	Promoter		Beneficia	d Owner		Executive Officer	Ш	Director		General and/or Managing Partner
Full Name (Last name first, it	f individual)		1							
Lau, Loren										
Business or Residence Addre	ss (Number and Stre	et, City	, State, Zij	Code)						
615 East 3650 North, Provo	, Utah 84604		i							·
Check Box(es) that Apply:	Promoter	⊠	Beneficia	l Owner	<u>⊠</u>	Executive Officer	<u>⊠</u>	Director		General and/or Managing Partner
Full Name (Last name first, it	f individual)		i							•
Watanabe, George										
Business or Residence Addre			, State, Zij	p Code)						
1135 Sandtrap Circle, Nort	h Salt Lake, Utah &	1054	i							
Check Box(es) that Apply:	Promoter	☒	Beneficia	al Owner		Executive Officer		Director		General and/or Managing Partner
Full Name (Last name first, i	f individual)									1
Tietjen, Bruce			i							<u> </u>
Business or Residence Addre	ss (Number and Stre	et, City	, State, Zij	p Code)						
615 East 3650 North, Provo	, Utah 84604				.=	··-				
Check Box(es) that Apply:	Promoter		Beneficia	al Owner		Executive Officer		Director		General and/or Managing Partner
Full Name (Last name first, i	f individual)									
Business or Residence Addre	ess (Number and Stre	et, City	, State, Ži _l	p Code)						
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				В.	INFOR	MATION A	BOUT OF	FERING				
1 Handha	issues sold	or does the is	cues intend t	o call to nor	aggradited	investors in t	hic offering?				Yes	No ⊠
1. Has the issuer sold, or does the issuer intend to sell, to non-accredited investors in this offering?									ш	6		
2. What is	the minimu	m investment	that will be		7.		_				\$ <u>N/A</u>	
					ļ						Yes ⊠	No
											М	Ц
remune person	ration for sol or agent of a	icitation of pr broker or dea	archasers in c ler registered	connection w with the SE	ith sales of se C and/or wit	ecurities in th h a state or st	e offering. It ates, list the t	f a person to b name of the b	e listed is an roker or deal	associated er. If more		
than fiv dealer o		to be listed a	re associated	persons of:	such a broker	or dealer, yo	ou may set fo	rth the inform	nation for tha	it broker or		
Full Name (L		st, if individu	al)		ï							
N/A					<u> </u>				<u>.</u>	-		
Business or F	Residence Ad	ldress (Numb	er and Street	t, City, State	, Zip Code)							
Name of Ass	ociated Brok	er or Dealer			-							
States in Wh	ich Person L	isted Has Sol	icited or Inte	nds to Solic	it Purchasers						, —	
(Check "A	all States" or	check individ	duals States)		······································						∐ Al	1 States
[AL]	[AK]	[AZ]	[AR]	[CA]	(ငဝှ်)	[CT]	[DE]	[DC]	[FL]	[GA]	[HI]	[ID]
,[IL]	[IN]	[IA]	[KS]	[KY]	[LA]	[ME]	[MD]	[[MA]	[MI]	[MN]	[MS]	[MO]
[MT]	[NE]	[NV]	[NH]	[[1]	[NM]	[NY]	[NC]	[ND]	[OH]	[OK]	[OR]	[PA]
[RI]	[SC]	[SD]	[TN]	[TX]	[לדט] 	[VT]	[VA]	[WA]	[WV]	[WI]	[WY]	[PR]
Full Name (I	ast name fir	st, if individu	ıal)		<u>i</u>					. <u>.</u>		<u> </u>
	_	_			 							
Buşiness or I	Residence Ad	idress (Numb	er and Stree	t, City, State	, Zip Code)							
Name of Ass	ociated Brol	er or Dealer	· · · 		<u> </u>	<u> </u>						
					· · ·		, <u>-</u>					
States in Wh	ich Person L	isted Has Sol	icited or Inte	ends to Solic	it Purchasers	;						
(Check "A	All States" or	check indivi	duals States)					••••			☐ Ai	Il States
[AL]	[AK]	[AZ]	[AR]	[CA]	[ငဝု်]	[CT]	[DE]	[DC]	(FL)	[GA]	(HI)	[ID]
[IL]	[IN]	[IA]	[KS]	[KY]	[ĻĄ]	[ME]	[MD]	[[MA]	[MI]	[MN]	[MS]	[MO]
[MT]	[NE]	[NV]	[NH]	[NJ]	[MM]	[NY]	[NC]	[ND]	[ОН]	[OK]	[OR]	[PA]
. [RI]	[SC]	[SD]	[TN]	[TX]	[עְיִדן	[V T]	[VA]	[WA]	[WV]	[WI]	[WY]	[PR]
Full Name (I	Last name fir	st, if individu	ıal)		· [<u>.</u>
Rusiness or 1	Residence A	ddress (Numl	ner and Stree	t City State	Zin Code)							<u>.</u>
Business of												
Name of Ass	sociated Brol	ker or Dealer			ĺ							
States in Wh	iich Person L	isted Has So	licited or Inte	ends to Solic	it Purchasers	;						
(Check "A	All States" or	check indivi	duals States)			•••••		***************************************			□ A	11 States
, [AL]	[AK]	[AZ]	[AR]	[CA]	(CO)	[CT]	[DE]	[DC]	[FL]	[GA]	(HI)	[ID]
[IL]	[IN]	[IA]	[KS]	[KY]	[LA]	[ME]	[MD]	[[MA]	[MI]	[MN]	[MS]	[MO]
(MT)	[NE]	[NV]	[NH]	[NJ]	[NM]	[NY]	[NC]	[ND]	(OH)	(OK)	[OR]	[PA]
[RI]	[SC]	[SD]	[TN]	[TX]	ເບ່າງ	[VT]	[ŶA]	[WA]	[WV]	[WI]	[WY]	[PR]
_	-		(Use	blank sheet,	or copy and	use additiona	l copies of the	his sheet, as n	ecessary)			

	C. OFFERING PRICE, NUMBER OF INVESTORS, EXPENSES AND US	E OF PROCEEDS	
1.	Enter the aggregate offering price of securities included in this offering and the total amount already sold. Enter "0" if answer is "none" or "zero." If the transaction is an exchange offering, check this box \(\bigcap \) and indicate in the columns below the amounts of the securities offered for exchange and already exchanged.		
	Type of Security	Aggregate Offering Price	Amount Already Sold
	Debt		\$
	Equity	\$ <u>12,000,000,00</u>	\$ <u>1,560,000.00</u>
;	Convertible Securities (including warrants)	\$ -0-	\$ -0-
	Partnership Interests		s -0-
•	Other (Specify)		\$ -0-
	Total		\$_1,560,000.00
		\$ <u>12,000,000.00</u>	ψ <u>1,500,000.00</u>
2.	Answer also in Appendix, Column 3, if filing under ULOE. Enter the number of accredited and non-accredited investors who have purchased securities in this offering and the aggregate dollar amounts of their purchases. For offerings under Rule 504, indicate the number of persons who have purchased securities and the aggregate dollar amount of their purchases on the total lines. Enter "0" if answer is "none" or "zero."		
	,	Number Investors	Aggregate Dollar Amount of Purchase
	Accredited investors	12	\$ <u>1,560,000.00</u>
	Non-accredited Investors	-0-	\$0-
	Total (for filings under Rule 504 only)		\$
	Answer also in Appendix, Column 4, if filing under ULOE.		
3.	If this filing is for an offering under Rule 504 or 505, enter the information requested for all securities sold by the issuer, to date, in offerings of the types indicated, in the twelve (12) months prior to the first sale of securities in this offering. Classify securities by type listed in Part C - Question 1.	m 4	D.W. 4
	Type of Offering	Type of Security	Dollar Amount Sold
1	Rule 505	n/a	\$
	Regulation A	n/a	\$
	Rule 504	n/a	\$
	Total	n/a	\$
4.	a. Furnish a statement of all expenses in connection with the issuance and distribution of the securities in this offering. Exclude amounts relating solely to organization expenses of the issuer. The information may be given as subject to future contingencies. If the amount of an expenditure is not known, furnish an estimate and check the box to the left of the estimate.		
	Transfer Agent's Fees.		\$
	Printing and Engraving Costs		\$0-
	Legal Fees	\boxtimes	\$ 25,000.00
	Accounting Fees		\$
•	Engineering Fees		\$
	Sales Commissions (specify finders' fees separately)	_	\$
	Other Expenses (identify)		\$ -0-
	Total		\$ 25,000.00
:			1

C. OFFERING PA	RICE, NUMB	ER OF INVESTORS, EXPENSES A	ND USE OF PRO	CEEDS	
b. Enter the difference between the aggregate of total expenses furnished in response to Part C proceeds to the issuer."	Question 4.a.	This difference is the "adjusted gross			\$ <u>11,975,000.00</u>
Indicate below the amount of the adjusted gross the purposes shown. If the amount for any purp- left of the estimate. The total of the payments I forth in response to Part C - Question 4.b above	ose is not know isted must equ	n, furnish an estimate and check the box	to the		
· · · · · · · · · · · · · · · · · · ·	·		Paymen Officers, Dir Affilia	ectors &	· Payments To Others
Salaries and fees		† 	S	-0-	S <u>-0-</u>
Purchase of real estate	•••••	<u> </u>		-0	□ \$ <u>-</u> 0-
Purchase, rental or leasing and installation of n	nachinery and	equipment	S	-0	□ \$ <u>-0-</u>
Construction or leasing of plant buildings and	facilities		🗆 \$	-0-	□ \$ <u>-0-</u>
Acquisition of other businesses (including the used in exchange for the assets or securities of	value of securi another issuer	ties involved in this offering that may be pursuant to a merger)	e 	-0	S -0-
Repayment of indebtedness	***************************************	 	D \$	-0-	□ \$o
Working capital		 			S \$11,975,000.00
Other (specify):		ł			□ \$0-
Column Totals		1			
Total Payments Listed (column totals add					5,000.00
The second secon	D.	FEDERAL SIGNATURE	*	8 .	1
The issuer has duly caused this notice to be signed by the indertaking by the issuer to furnish the U.S. Securities accredited investor pursuant to paragraph (b)(2) of Rule (ssuer (Print or Type) Perfect Search Corporation Name of Signer (Print or Type)	and Exchange 502.	uly authorized person. If this notice is file Commission, upon written request of its st	d under Rule 505, the taff, the information	te following furnished b	signature constitutes an by the issuer to any non-
George I. Watanabe	Vice Preside	nt			
· · · · · · · · · · · · · · · · · · ·					
•		ATTENTION			

Intentional Misstatements or Omissions of Fact Constitute Federal Criminal Violations. (See 18. U.S.C. 1001.)

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